

of 1913, hereby modifies the above-mentioned quarantine order as follows:

Quarantine shall be defined as the confinement of all dogs and cats within the designated area upon the private premises of the owners under restraint by leash or closed cage or paddock, except that persons over the age of fifteen years shall be permitted to take their dogs and/or cats on the public streets and highways when such animals are controlled by suitable leash not over five feet in length, and when so controlled may also take them on the highway in automobiles; *except* that those dogs and cats, quarantined as rabies contacts and confined to their premises or such other place as may be designated by the health officer or his representative, shall not be permitted to leave the designated premises upon which they are confined.

March 2, 1938.

W. M. DICKIE, M.D.,

*Director of Public Health and Executive  
Secretary, State Board of Public Health.*

#### Concerning Portland meeting of American Public Health Association: Western Branch.

*To the Editor:*—May we ask you to call the attention of your readers to the fact that the Western Branch, American Public Health Association, will hold its ninth annual meeting in Portland, Oregon, June 6, 7, and 8, 1938. The program will be devoted to discussion of public health matters of special interest to the West, and will present speakers of national and western prominence.

Inquiries should be addressed to Dr. William Levin, State Department of Health, 816 Oregon Building, Portland, or to the undersigned.

Sincerely yours,

W. P. SHEPARD, M.D.,  
*Secretary.*

#### Concerning Child Health Day, Sunday, May 1, 1938.

U. S. DEPARTMENT OF LABOR  
CHILDREN'S BUREAU  
WASHINGTON

*To the Editor:*—Dr. W. W. Bauer, Director, Bureau of Health and Public Instruction of the American Medical Association, has suggested that we send to you the enclosed Suggestions for the Observance of May Day—Child Health Day, 1938—with the request that you give some notice to it in your state medical journal. . . .

Sincerely yours,

KATHARINE F. LENROOT,  
*Chief, Children's Bureau.*

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(COPY)

May Day—Child Health Day, 1938

Sunday, May 1

Supplementary Observance, April 30 and May 2

#### *Suggestions for Observance*

Child Health Day activities are sponsored by the Children's Bureau at the request of the State and Provincial Health Authorities of North America in accordance with the Congressional Resolution of May 18, 1928, which authorized the President to proclaim May Day as Child Health Day.

*Slogan.*—Speed children on the road to health.

*Objective.*—Every community to make full use of its resources in order to insure to children safe birth, normal growth, and protection against disease and accident in their progress from infancy to maturity.

*Leadership.*—State May Day chairmen appointed by State health officers arrange for the coöperation of State and local public agencies and private organizations in planning May Day activities that will contribute to year-round child-health activities. State departments of education co-operate in planning school Child Health Day programs.

*Program.*—For community groups: (1) Review of local child-health activities; (2) planning for the extension and

improvement of child-health programs; and (3) presentation of special child-health needs requiring the attention of parents and others in the community.

By children: Exhibits, demonstrations, programs, plays, games, and festivals, illustrating the health needs of children, healthful activities, and progress made during the year in their knowledge concerning the protection of their own health and of the health of the community.

For the general public: News stories, radio talks, speeches, posters, exhibits.

For information on State programs, write to State May Day Chairman, State Department of Health.

#### COMMITTEE OF REVISION OF THE

PHARMACOPOEIA OF THE UNITED STATES OF AMERICA  
1930-1940

*Announcement by the U. S. P. Anti-Anemia Products  
Advisory Board Concerning Liver Preparations  
Conforming to U. S. P. Standards*

*To the Editor:*—When liver and stomach preparations were admitted to the U. S. Pharmacopoeia, Eleventh Edition, it was recognized that these products presented a different problem, from the viewpoint of standardization, than any question previously before the Pharmacopoeia.

As no ordinary methods for standardization or testing were available, an Advisory Board, made up of specialists in the treatment of anemia, was appointed. This Board established methods for determining the value of anti-anemia products, and the basis for a U. S. P. "unit of potency." They also issued forms for reporting evidence of clinical value and announced regulations for indicating the potency of U. S. P. products and for the wording of the labels.

On the invitation of the Board, a large number of clinical reports were submitted by manufacturers in evidence of the value of their products, and the Anti-Anemia Board, after reviewing these records, herewith submit their conclusions. This first report lists the products which have been approved up to this time as complying with the U. S. P. specifications and the firms authorized to sell or distribute them.

As is probably generally known, only a relatively small group of manufacturers have provided the necessary hospital facilities for checking the clinical value of anti-anemia products as required by the Board, and several of these distribute their products through the medium of other pharmaceutical firms.

Having been supplied with adequate clinical evidence of the efficiency of a manufacturer's product and having accepted it as of U. S. P. grade with a specific dose, the Anti-Anemia Board, on request, have also authorized the distribution of some of these approved products by other firms when the firms have given assurance that their handling of the products will in no way alter its quality or potency. No doubt the Board will later report additional approved preparations and firms.

Any assistance which you can give in extending publicity to this report will be appreciated.

Forty-third Street and Woodland Avenue,  
Philadelphia, Pa.

Respectfully,

E. FULLERTON COOK.

#### Concerning rehabilitation of mental defectives.

*To the Editor:*—Dr. Walter E. Fernald, one of the greatest pioneers in the treatment of the mentally deficient, once said:

"There is no panacea for feeble-mindedness. There will always be mentally defective persons in the population of every state and country. All of our experience in dealing with the feeble-minded indicates that if we are adequately to manage the individual defective, we must recognize his condition while he is a child, protect him from evil influences, train and educate him according to his capacity, make him industrially efficient, teach him to acquire correct

habits of living, and, when he has reached adult life, continue to give him the friendly help and guidance he needs."

How New York State is providing for the rehabilitation of its mental defectives who are capable of material improvement, and for the humane custodial care for persons of such a low grade of development that they cannot be restored to community life, are discussed in a newly published report of the survey of the methods of care, treatment, and training of the feeble-minded at Letchworth Village, Thiells Post Office, Rockland County, New York, one of the state's largest institutions for the mentally deficient. Upon request, we will be glad to send you a copy of the report.

Sincerely, yours,

F. B. KIRKBRIDE,  
*President.*

**Concerning Coöperation of Major Disaster Emergency Council in recent Los Angeles floods.**

MAJOR DISASTER EMERGENCY COUNCIL  
2224 WEST SIXTH STREET (WESTLAKE PARK)  
LOS ANGELES CALIFORNIA

March 22, 1938.

To Medical and Sanitation Committee:

George Parrish, M.D.  
Edward M. Palette, M.D.  
George H. Kress, M.D.

Dear Doctors:—You will find enclosed a facsimile of a letter from the Mayor. This letter carried his appreciation to all members of the Emergency Council. Therefore, I felt I should pass it on to you.

You will also find enclosed a copy of my report on the activities of the Emergency Council.

Respectfully,

BASIL E. RICE,  
*Director of Coördination.*

✓ ✓ ✓

(COPY)

OFFICE OF THE MAYOR  
CITY HALL  
LOS ANGELES, CALIFORNIA

March 11, 1938.

Mr. Basil E. Rice  
Director of Coördination  
Major Disaster Emergency Council  
2224 West Sixth Street  
Los Angeles, California

Dear Mr. Rice:

I feel that you and your associates in the administration of the Major Disaster Emergency Council are deserving of the highest commendation for the effective manner in which you responded to your first alarm on March 2, 1938, when our city was threatened with catastrophe. The efficient work of the several committees in maintaining communications, rescuing victims of the flood, providing prompt relief to those who had suffered loss, and allaying the fears of our citizens generally by frequent assurance of reliable information, gave a clear demonstration of the worth and the potential strength of the organization.

We are grateful that we were spared a major disaster, and out of the unfortunate crisis we have gained a new confidence and assurance that our Major Disaster Emergency Council is prepared to meet any call, no matter how great it may be or when it may come.

With kindest regards,

Sincerely yours,

FRANK L. SHAW, *Mayor.*

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(COPY OF COÖRDINATOR'S REPORT)

March 10, 1938.

The Major Disaster Emergency Council got a real work-out on March 2, 3, and 4. Even though this was not considered a real major disaster, it did give us an opportunity to test our plans.

In making a report of the activities of this Council it must be remembered what the Major Disaster Emergency Council is. It is all the departments of the City Government. The American Red Cross, our public utilities, privately owned corporations, our contractors, supply houses, our hospitals, physicians and surgeons, etc. In fact, everyone in the community who is expected to act in time of disaster has brought themselves together and formed a Major Disaster Emergency Council; a place where they have been able to formulate plans and correlate their efforts. Therefore, it can be readily understood how impossible any single report could be made to cover all the activities of the Emergency Council.

All of the various units of this Emergency Council have made individual reports which cover their particular phases of the program. We then will make our report along more general lines.

This was one of those disasters that developed slowly with no one being able to predict how far it would go. During the first hours it seemed that each problem we were called upon to solve would be the last, until suddenly we came to the realization that we had a tremendous problem before us, and it was a real source of satisfaction to note the promptness with which the various units and individual members of the Council responded.

Early on the morning of the 2nd, Frank L. Shaw, Mayor, and Chairman of the Emergency Council, came to Emergency Council headquarters and took personal charge. Practically every member of the Executive Committee reported either in person or by telephone, and reported that they were in constant touch with the members of their subcommittee and that the entire emergency set-up was standing by; that we might use all or any part of it as the need required.

The telephone communication in the city was excellent. Therefore, it was not necessary to call regular mobilization of all the members.

All departments of the City Government went into action doing their respective jobs, calling upon the Reserves as needed. There was a very close understanding between all departments. There was not a call for Reserves that was not answered promptly, proving that the great amount of planning which had been done was of untold value, and enabled them to locate outside facilities with the minimum of time.

The American Red Cross section was very busy, and began using boats for evacuating homes early. They established refugee camps in Venice, Canoga Park, Van Nuys, North Hollywood, and Tujunga. It was marvelous to see how the various units of this section coöperated one with the other. There was very little lost motion and never a question as to where to find supplies. All the plans of the supply committee proved their worth, as it enabled them to know exactly where to get everything that was needed, such as blankets, cots, food, etc.

An opportunity was given to try out the new committee, known as the Administrative Units, composed of Reserve Army officers working as representatives of the American Red Cross. They moved into five camps and even though the refugees were few they were able to test their plans. Each group made reports of their activities and recommendations for future planning which will enable us to perfect one of the most important groups of the Council.

This was typical of the entire program. We were able to check our planning and, in cost cases, found it good. We found the headquarters needs more telephone lines. This lack of sufficient phone service slowed up the program and caused us to lose a number of calls. This fault is already being corrected.

We found the need of a central intelligence group, where all information regarding the disaster would be assembled. There was need of regular half-hour bulletins and special bulletins, when the occasion required, from the Flood Control, Police Department, Sheriff's Office, Water Department, Public Utilities, American Red Cross, and others who gather information. These bulletins should have been made to a central intelligence group who in turn should release regular news bulletins and clear all rumors, and request for mobilization of various groups, etc. We feel that this would, to a great extent, correct one of our greatest evils in the recent flood, that of wild rumors being broadcast which caused much confusion.